

07/30/81

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| Class                | Subclass |
| ISSUE CLASSIFICATION |          |

PATENT NUMBER

## U.S. UTILITY Patent Application

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| <div>Q.I.P.E.</div> <div>SCANNED <u>TH4</u> Q.A. <u>4m</u></div> | PATENT DATE |
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|------------------------------|------------|--------------|----------|------------------|----------|
| APPLICATION NO.<br>09/917979 | CONT/PRIOR | CLASS<br>428 | SUBCLASS | ART UNIT<br>1773 | EXAMINER |
|------------------------------|------------|--------------|----------|------------------|----------|

## APPLICANTS

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Chris Vargas

**TITLE**

Compliant laminar eddy current sensitivity standard

PTO-2040  
12/89[illegible]

|   |                                      |             |            |                                   |                      |
|---|--------------------------------------|-------------|------------|-----------------------------------|----------------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                      |             |            | <b>CLAIMS ALLOWED</b>             |                      |
|   | Sheets Drwg.                         | Figs. Drwg. | Print Fig. | Total Claims                      | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  | _____<br>(Assistant Examiner) (Date) |             |            | <b>NOTICE OF ALLOWANCE MAILED</b> |                      |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____<br>_____<br>_____   |                                      |             |            | <b>ISSUE FEE</b>                  |                      |
|   | _____<br>(Primary Examiner) (Date)   |             |            | Amount Due                        | Date Paid            |
| <input type="checkbox"/> The terminal ____months of this patent have been disclaimed.   |                                      |             |            | <b>ISSUE BATCH NUMBER</b>         |                      |
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